

**P.020****Advanced care team for Parkinson's: a novel approach for patients and carepartners in advanced parkinsonism**

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**Background:** People with parkinsonian syndromes (PPS) in advanced stages deal with a wide range of highly impactful motor and non-motor problems, including dementia, hallucinations, falls, and dysautonomia. Care planning becomes difficult and unpredictable. In addition, while healthcare providers focus on reducing symptom burden, PPS and carepartners deal with difficult emotions such as demoralization and grief. At those stages, multidisciplinary care becomes imperative. In October 2022 we launched Advanced Care Team for Parkinson's (ACT-PD), a clinical research program whose goals include advanced care planning, symptoms management and emotional support. **Methods:** Our primary outcomes are changes in quality of life (QoL-AD), carepartner burden (ZBI-12) and patient satisfaction. The team involves neurology, palliative nursing, social-work, psychology, and spiritual care. Every three months, participants meet the team in person or virtually. In two hours, they address tailored concerns, complemented with phone calls as required. Accordingly, participants complete assessments. **Results:** In its first 4 months, ACT-PD included 40 PPS and 40 carepartners. Preliminary results show that the first visit with ACT-PD resulted in a 30% reduction in carepartner burden and 28% of improvement in patients' QoL. **Conclusions:** Even in early phases, this novel patient and carepartner-centered approach improves QoL and reduces carepartner burden in PPS in advanced disease stages.

**P.021****Botulinum toxin type a for Parkinson's Disease - related painful foot dystonia**

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**Background:** Pain is a frequent symptom in Parkinson's disease (PD), and the therapeutic alternatives are scarce. The goal of this trial was to assess the effects of botulinum toxin type A (BTXA) in the treatment of foot dystonia in PD. **Methods:** Randomized placebo-controlled trial (RCT) (double-blind parallel-group study) evaluating the safety and efficacy of BTXA for PD-related painful foot dystonia using 100 units of BTXA/placebo, followed by an open-label phase. The primary outcome was a change in pain on the King's Parkinson's disease Pain scale and on a visual analogue scale at 6, 12 and 24 weeks. Secondary outcomes included the percentage of responders, clinical global impression, MDS-UPDRS, PDQ-39 scores, and adverse events. **Results:** 40 subjects were screened and 33 were enrolled. The RCT blind will be opened in March 2023 after the final study visit and data will be available for presentation at the June 2023

conference. The current open-label phase has revealed a preliminary that the toxin is safe and effective in reducing pain in PD-related foot dystonia with 84% of participants noticing a significant benefit. **Conclusions:** According to our preliminary data, targeted BTXA injections are a safe and effective treatment in patients with foot dystonia and PD.

**P.022****Cross-cultural experiences and expectations from caregivers of people living with Parkinson's Disease: a comprehensive review**

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**Background:** Care partners of people with Parkinson's disease (PD) must continually cope with various stressors due to changes resulting from the disease process, including assisting and supporting with their medical, emotional, and social needs. Caregivers' expectations, preferences, and experiences on PD management are a cornerstone to guarantee a comprehensive treatment of the disease and may be influenced or determined by cultural backgrounds. **Methods:** Comprehensive literature review to investigate the roles, experiences, and needs of caregivers of PwPD across cultures. We critically reviewed and analyzed the all published studies that examined the impact of cultural diversity on caregiving in PD. **Results:** Among some significant results, we found profound differences in caregivers' experiences and perceptions between U.S, Mexican, and Latin-American, Asian, African and Indian caregivers. There are clear negative reinforced effects between caregiver status, education, health, labor participation and income-generating capacity, and social protection combined with the age and gender differences. Canadian information was not available. **Conclusions:** There is still a gap in the literature with a need for social and health services to understand the cultural factors that impact caregiver burden in PD to facilitate wellbeing and support from health and social services to better aid those in the caregiver role.

**P.023****The Pain in Dystonia Scale (PIDS): development and validation**

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**Background:** Pain is a common symptom in adult-onset idiopathic dystonia (AOID). An appropriate tool to understand this symptom is needed to improve AOID patients' care. We developed a rating instrument for pain in AOID and validated it in cervical dystonia (CD). **Methods:** Development and validation of the Pain in Dystonia Scale (PIDS) in three phases: 1. International experts and participants generated and evaluated the preliminary